

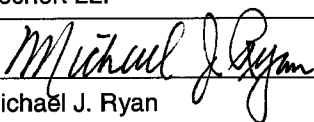
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|--|----------------------|--------------------------|-----------------------|
| <h1>TRANSMITTAL<br/>FORM</h1> <p><i>(to be used for all correspondence after initial filing)</i></p> | Application Number   | 10/685,020 (Conf. #4313) |                       |
|  | Filing Date          | October 14, 2003         |                       |
|  | First Named Inventor | Lawrence Hamann          |                       |
|  | Art Unit             | 1626                     |                       |
|  | Examiner Name        | SHIAO, Rei Tsang         |                       |
| Total Number of Pages in This Submission   | 2                    | Attorney Docket Number   | 374123-133D1 (399452) |

**ENCLOSURES (Check all that apply)**

|   |   |  |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form<br><br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment/Reply<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <div style="border: 1px solid black; padding: 5px;">         Remarks       </div>   |   |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |   |          |        |
|--------------|---|----------|--------|
| Firm Name    | Dechert LLP   |          |        |
| Signature    |  |          |        |
| Printed name | Michael J. Ryan   |          |        |
| Date         | August 15, 2008   | Reg. No. | 41,283 |